

SENATE BILL No. 415

DIGEST OF INTRODUCED BILL

Citations Affected: IC 27-8-24.2.

Synopsis: Insurance coverage for contraceptives. Requires insurers, health maintenance organizations, preferred provider plans, and comprehensive health insurance policies providing coverage for outpatient prescription drugs and outpatient services provided by health care providers to provide equal coverage for contraceptive drugs, devices, and services.

Effective: July 1, 1999.

Simpson

January 11, 1999, read first time and referred to Committee on Health and Provider Services.



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Introduced

First Regular Session 111th General Assembly (1999)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1998 General Assembly.

SENATE BILL No. 415

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 27-8-24.2 IS ADDED TO THE INDIANA CODE
2 AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 1999]:

4 **Chapter 24.2. Contraceptive Coverage**

5 **Sec. 1. As used in this chapter, "contraceptive" means a**
6 **prescription contraceptive drug, device, or service approved by the**
7 **United States Food and Drug Administration that is:**

8 (1) **intended to prevent pregnancy, including a medically**
9 **necessary or appropriate consultation, examination,**
10 **procedure, or medical service;**

11 (2) **provided on an outpatient basis; and**

12 (3) **related to the use of contraceptive methods to prevent an**
13 **unintended pregnancy.**

14 **The term does not include abortion (as defined in IC 16-18-2-1).**

15 **Sec. 2. As used in this chapter, "covered person" means an**
16 **individual policyholder, a subscriber, a certificate holder, an**
17 **enrollee, or other individual who is covered by the insurance policy**

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of a policyholder, a subscriber, a certificate holder, or an enrollee.

Sec. 3. (a) As used in this chapter, "insurance policy" means a:

(1) policy of accident and sickness insurance regulated under IC 27-8-5;

(2) health maintenance organization regulated under IC 27-13;

(3) preferred provider plan (as defined in IC 27-8-11-1) that provides basic health care services (as defined in IC 27-13-1-4); or

(4) comprehensive health insurance policy issued under IC 27-8-10;

that provides coverage under an individual or group policy or plan issued for delivery in Indiana.

(b) The term does not include:

(1) an employee benefit program subject to the federal Employee Retirement Income Security Act (29 U.S.C. 1001 et seq.); or

(2) worker's compensation coverage for an injury to, or occupational disease of, an employee under IC 22-3.

Sec. 4. As used in this chapter, "prescription drug" means an article or substance regulated under IC 16-42-19.

Sec. 5. An insurance policy that provides coverage for outpatient prescription drugs may not exclude or restrict benefits for prescription contraceptive drugs or devices approved by the United States Food and Drug Administration to a covered person.

Sec. 6. An insurance policy that provides coverage for outpatient services provided by a health care professional may not exclude or restrict benefits for outpatient contraceptive services provided by a health care professional to a covered person.

Sec. 7. The coverage required under this chapter may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to covered persons than the dollar limits, deductibles, copayments, or coinsurance provisions applying to physical illness generally under the insurance policy.

Sec. 8. A covered person may not be required to pay a deductible, coinsurance, or copayment for contraceptive drugs, devices, or services that is greater than a deductible, coinsurance, or copayment established for other prescription drugs, devices, or services under the insurance policy.

Sec. 9. A covered person who receives or is eligible to receive contraceptive drugs, devices, or services under this chapter may not be required to pay a deductible, coinsurance, copayment, or fee



1 that is greater than a deductible, coinsurance, copayment, or fee
 2 established for individuals of the same benefit category or class, or
 3 coinsurance or copayment level, receiving benefits for other
 4 prescription drugs, devices, or services.

5 **Sec. 10. If a covered person's health care provider determines**
 6 **that contraceptive methods specifically covered under an insurance**
 7 **policy are not medically appropriate for the covered person, the**
 8 **insurance policy must provide coverage for another medically**
 9 **approved prescriptive contraceptive method prescribed by the**
 10 **covered person's health care provider.**

11 **SECTION 2. [EFFECTIVE JULY 1, 1999] (a) As used in this**
 12 **SECTION, "insurance policy" means a:**

13 (1) policy of accident and sickness insurance regulated under
 14 IC 27-8-5;

15 (2) health maintenance organization regulated under
 16 IC 27-13;

17 (3) preferred provider plan (as defined in IC 27-8-11-1) that
 18 provides basic health care services (as defined in
 19 IC 27-13-1-4); or

20 (4) comprehensive health insurance policy issued under
 21 IC 27-8-10;

22 that provides coverage under an individual or group policy or plan
 23 issued for delivery in Indiana.

24 (b) The term does not include:

25 (1) an employee benefit program subject to the federal
 26 Employee Retirement Income Security Act (29 U.S.C. 1001, et
 27 seq.); or

28 (2) worker's compensation coverage for an injury to, or
 29 occupational disease of, an employee under IC 22-3.

30 (c) IC 27-8-24.2, as added by this act, applies to insurance
 31 policies issued, delivered, executed, or renewed after June 30, 1999.

